

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>in. 9</i>		<i>07-03-01</i>
O.I.P.E. CLASSIFIER		<i>108A</i>	<i>7/4/01</i>
FORMALITY REVIEW	<i>LS</i>		<i>8/17/01</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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3	<i>02-03</i>
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Claim	Date
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52	<i>30</i>
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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*11/18*